● PRINTER RUSH ●
(PTO ASSISTANCE)

Application: 09/735745 Examiner: Miller GAU: 2683

From: _____ Location: (IDC) FMF FDC Date: 10-01-05

Tracking #: EPM- 09/735745 Week Date: 6-27-05

DOC CODE	DOC DATE	MISCELLANEOUS
☐ 1449	_____	☐ Continuing Data
☐ IDS		☐ Foreign Priority
☒ CLM	4-6-05	☐ Document Legibility
☐ IIFW	_____	☐ Fees
☐ SRFW	_____	☐ Other
☐ DRW	_____	
☐ OATH	_____	
☐ 312	_____	
☐ SPEC	_____	

[RUSH] **MESSAGE:** Claim 15 (original Claim 16) depends on original claim 15, which was canceled.

Thank you

[XRUSH] **RESPONSE:** Claim 15 (original Claim 16) should be changed to depend upon original claim 14.

INITIALS: BJM

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04